

LCLC HOLISTIC INTAKE FORM

Date: _____ Case Manager: _____ Lawyer: _____

CLIENT INFORMATION

FIRST NAME:		LAST NAME:	
DATE OF BIRTH:		AGE:	
RACE/ETHNICITY:		GENDER:	
ADDRESS:			ZIP CODE:
CELL #:	HOME #:		OTHER #:
EMAIL:		FACEBOOK NAME:	
PARENT /GUARDIAN NAME:			PHONE #:
PARENT /GUARDIAN NAME:			PHONE #:

LCLC PROGRAM OVERVIEW

How did you hear about LCLC? _____

What, if anything, do you know about LCLC already? _____

Explanation of LCLC services

Do you understand the holistic model of services provided at LCLC? ☐ Yes ☐ No

Briefly describe the model in your own words. Describe in your own words what you commit to doing, and how frequently you will do it: _____

What specific services are of greatest interest to you? Why? _____

Youth Signature

Date

Case Manager Signature

Date

Lawyer Signature

Date

FAMILY					Members of your Household (who do you live with)				
Name	Relationship	Age	Address (if different)	Phone Number					

SUPPORTIVE ADULTS				People who support you and/or would say good things about you			
Name	Relationship	Address	Phone Number				

CHILDREN			
Child's Name	Age	Mother/Father Name	Address (if different)

COMMUNITY			
Program/Organization	Type of Program	Contact Person	Dates Attended

Do you have a mentor or role model in your life? What do you admire about them? _____

Who has been most supportive of you as you pursue life goals? How? _____

When you are in a crisis, who do you go to for help? Why? _____

Who or what has been your greatest motivation to make positive decisions in life? How? _____

EDUCATION				
Name of School	Location	Start	End	Grade/Credits

Do you have an Individual Education Plan (IEP)? ☐ Yes ☐ No

If yes, for what? (learning disability, behavior/emotional disorder, other) _____

When was it last reviewed? _____

Were you ever suspended, expelled, or asked not to return to school? (Describe) _____

How often do you attend school? What prevents you from attending every day? _____

On average, what kind of grades did you get on your last report card? _____

EMPLOYMENT				
Employer	Location	Type of Work	Start date	End date

What are your career goals? _____

What skills do you have to achieve those career goals? _____

What skills would you like to learn? _____

WELLNESS

Have you ever been hospitalized? ☐ Yes ☐ No

If yes, when, where, and for what reason? _____

Are you currently taking any medications? ☐ Yes ☐ No

If yes, which ones? _____

Have you ever used any illegal drugs? ☐ Yes ☐ No

If yes, which ones? _____

Are you currently using? ☐ Yes ☐ No

Frequency of use: _____

How long has it been since you last used? (Check one)

☐ less than 30 days ☐ 1-5 months ☐ 6 months - 1 year ☐ more than 1 year

Have you ever participated in drug treatment? ☐ Yes ☐ No

If yes, when and where? _____

Have you ever been diagnosed with a mental or emotional condition (depression, bipolar, etc.)? ☐ Yes ☐ No

If yes, what, when, and where? _____

Have you ever met with a counselor? ☐ Yes ☐ No

If yes, when, where, and for what reason? _____

PEERS, SAFETY, TRANSPORTATION

Are you able to come to LCLC (1530 S. Hamlin)? ☐ Yes ☐ No

If no, why? _____

Alternative meeting space? _____

Are there other areas of North Lawndale that you feel unsafe going to? ☐ Yes ☐ No

If yes, where? _____

Do you feel safe in your home? ☐ Yes ☐ No

If no, why? _____

How do you usually get around? (walk, CTA, car) _____

How do you usually get to court? _____

If we can't reach you by phone, where can we find you? (home, relative's house, friend's house, particular block)

Do your friends and you call yourselves anything? _____

LEGAL HISTORY

How many times have you been arrested in your life? _____

How many times have you been arrested in the last six months? _____

Have you ever spent time in jail or detention? ☐ Yes ☐ No

If yes, when? _____

How many adult court cases have you had? Charge? Outcome? _____

How many juvenile court cases have you had? Charge? Outcome? _____

Are you currently on probation, parole, or another form of court supervision? ☐ Yes ☐ No

If yes, which one? ☐ Probation ☐ Parole ☐ _____

Juvenile or adult? ☐ Juvenile ☐ Adult

For what offense(s)? _____

Probation/parole officer: _____

How long is your probation/parole? When did it start? _____

Have you had violations of probation/parole prior to this incident? ☐ Yes ☐ No

If yes, for what? (new case, technical) When? _____

Have you previously been on probation, parole, or another form of court supervision? ☐ Yes ☐ No

If yes, which one? ☐ Probation ☐ Parole ☐ _____

Juvenile or adult? ☐ Juvenile ☐ Adult

For what offense(s)? _____

Probation/parole officer: _____

When did you terminate probation/supervision/parole? _____

Did you terminate satisfactory, unsatisfactory, or undesignated? _____

BASICS OF CURRENT LEGAL CASE

Number of cases: _____

Adult or juvenile court: _____

Judge and room #: _____

Charges: _____

Date and time of arrest: _____

Have you had a preliminary hearing or been indicted? (adults only) ☐ Yes ☐ No

Have you been arraigned? ☐ Yes ☐ No

PREVIOUS COURT DATES

Date	Location	Reason for court appearance	Notes:

CUSTODY STATUS

IF YOUTH IS IN CUSTODY:

ADULTS

What is your current bond? _____

Can you or your family post your bond? ☐ Yes ☐ No

Has your lawyer moved for a bond reduction in your case? ☐ Yes ☐ No

If yes, when? _____

What was the result?

What programs, if any, have you taken advantage of in custody? (i.e. high school, SAVE, MHTC, Westcare, etc.)

JUVENILES

How long have you been at JTDC? _____

Has your lawyer asked the judge for your release? If yes, when? What happened? _____

What pod are you on? _____

What is your case worker's name? _____

What level are you on? _____

Are you in any programs? _____

IF YOUTH IS NOT IN CUSTODY

When were you released? _____

What is your bond (type and amount)? (adults only) _____

Are you on Electronic Monitoring? ☐ Yes ☐ No

If yes, what kind? (Sheriff, Pretrial Services, juvenile) _____

Do you currently have movement for work, school or any other purpose? Do you need movement?

Do you have any other pretrial conditions? (curfew, pretrial services, expediter unit, evening reporting center (ERC))

DOCUMENT CHECKLIST

- ☐ Blank releases
- ☐ School release
- ☐ Internal communication release
- ☐ Photo release
- ☐ Safety agreement
- ☐ Attorney client agreement
- ☐ Public defender file release

REMINDER: Schedule initial staffing

CASE DETAILS (LEGAL ONLY)

Please provide a detailed narrative of what events led to the youth being charged (on a separate piece of paper):

- What events led up to the youth's arrest?
- When and how did the police first approach the youth?
- When and how did the police arrest the youth?
- What happened at the police station? Did the youth make any statements? How long and in what conditions was the youth held? Was a parent and/or lawyer contacted?
- Was there an identification made?
- Witnesses and/or co-defendants?
- Cameras? (BWC, ICC, POD, cell phone)